

STATEMENT OF ECONOMIC INTERESTS

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NAME OF FILER

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CITY CLERK (MIDDLE)
CITY OF LODI

HANSEN

LARRY

1. Office, Agency, or Court

Agency Name

Lodi City Council

Division, Board, Department, District, if applicable

CITY COUNCIL MEMBER

Your Position

► If filing for multiple positions, list below or on an attachment.

Agency: REDEVELOPMENT AGENCY

Position: MEMBER

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of Lodi

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is / / , through December 31, 2010.

☐ Assuming Office: Date / /

☐ Leaving Office: Date Left / / (Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ The period covered is / / , through the date of leaving office.

☐ Candidate: Election Year

Office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page:

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is a

I certify under penalty of perjury under the laws of the State of California that

Date Signed

3-31-2011

(month, day, year)

Signature

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name <u>HANSEN</u>
--

► NAME OF SOURCE

CJ STRATEGIES LLC
 ADDRESS (Business Address Acceptable)
525 NINTH ST NW WASHINGTON DC

BUSINESS ACTIVITY, IF ANY, OF SOURCE
POLITICAL CONSULTANT
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
4/20/2010 \$ 75.00 baseball game
TICKET

_____/_____/_____ \$ _____
 _____/_____/_____ \$ _____

► NAME OF SOURCE

FARMERS & MERCHANTS BANK
 ADDRESS (Business Address Acceptable)
121 WEST PINE
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

BANKING
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
9/9/10 \$ 375.00 TICKET TO ROCK
THE SQUARE CONCERT

_____/_____/_____ \$ _____
 _____/_____/_____ \$ _____

► NAME OF SOURCE

 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
 _____/_____/_____ \$ _____
 _____/_____/_____ \$ _____
 _____/_____/_____ \$ _____

► NAME OF SOURCE

 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
 _____/_____/_____ \$ _____
 _____/_____/_____ \$ _____
 _____/_____/_____ \$ _____

► NAME OF SOURCE

 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
 _____/_____/_____ \$ _____
 _____/_____/_____ \$ _____
 _____/_____/_____ \$ _____

► NAME OF SOURCE

 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
 _____/_____/_____ \$ _____
 _____/_____/_____ \$ _____
 _____/_____/_____ \$ _____

Comments: _____
